

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MG</i>		2/11/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>EW</i>	64834	4/30/00
RESPONSE FORMALITY REVIEW			

09/497154

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

AVAILABLE COPY

BEST AVAILABLE COPY

Claim	Date
Final	
Original	2/19/00
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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